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Bib Data Sheet

CONFIRMATION NO. 4058

SERIAL NUMBER 09/220,016	FILING DATE 12/23/1998 RULE	CLASS 455	GROUP ART UNIT 2682	ATTORNEY DOCKET NO. 77682-7	
APPLICANTS ANDREW JOHN HOMAN, ONTARIO, CANADA; PETER GALE, ONTARIO, CANADA;					
** CONTINUING DATA ***** NONE CA					
** FOREIGN APPLICATIONS ***** NONE CA					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Allowance</u> Examiner's Signature <u>Ch. H. H. H.</u> Initials		STATE OR COUNTRY CANADA	SHEETS DRAWING 7	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 3
ADDRESS 33000					
TITLE INTELLIGENT WIRELESS TERMINAL WITH VIRTUAL MEMORY					
FILING FEE RECEIVED 1032	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

SERIAL NUMBER <div style="text-align: center;">09/220,016</div>	FILING DATE <div style="text-align: center;">12/23/98</div>	CLASS <div style="text-align: center;">455</div>	GROUP ART UNIT <div style="text-align: center;">2744</div>	ATTORNEY DOCKET NO. <div style="text-align: center;">77682-7</div>
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APPLICANT

ANDREW JOHN HOMAN, ONTARIO, CANADA; PETER GALE, ONTARIO, CANADA.

****CONTINUING DOMESTIC DATA*******
 VERIFIED
NONE CA

****371 (NAT'L STAGE) DATA*******
 VERIFIED
NONE CA

****FOREIGN APPLICATIONS*******
 VERIFIED
NONE CA

Foreign Priority claimed 35 USC 119 (a-d) conditions met <div style="display: flex; justify-content: space-between; font-size: small;"> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance </div>	STATE OR COUNTRY <div style="text-align: center;">CAX</div>	SHEETS DRAWING <div style="text-align: center;">7</div>	TOTAL CLAIMS <div style="text-align: center;">26</div>	INDEPENDENT CLAIMS <div style="text-align: center;">3</div>
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Verified and Acknowledged CA

Examiner's Initials
Initials

ADDRESS

SMART AND BIGGAR
 55 METCALFE STREET SUITE 900
 P O BOX 2999 STATION D
 OTTAWA ON K1P 5Y6
 CANADA

AIR MAIL

TITLE

INTELLIGENT WIRELESS TERMINAL WITH VIRTUAL MEMORY

FILING FEE RECEIVED <div style="text-align: center;">\$868</div>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="font-size: small;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit </div>
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